

PART B - FEE(S) TRANSMITTAL

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5514 7590 01/16/2007

FITZPATRICK CELLA HARPER & SCINTO
30 ROCKEFELLER PLAZA
NEW YORK, NY 10112

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/161,294	09/28/1998	TETSUNOBU KOCHI	35.C12980	7439

TITLE OF INVENTION: PHOTOELECTRIC CONVERSION APPARATUS WHICH AVOIDS CERTAIN SHADING EFFECTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	04/16/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, LUONG TRUNG	2622	348-310000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<u>FITZPATRICK, CELLA,</u>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<u>2. HARPER & SCINTO</u>
	3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for reconsideration as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
CANON KABUSHIKI KAISHA

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
<input type="checkbox"/> Publication Fee (No small entity <input checked="" type="checkbox"/> Small Entity)	<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.
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Authorized Signature Jennifer A. Reda Date March 21, 2007
 Typed or printed name Jennifer A. Reda Registration No. 57,840

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